

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 4
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund			FEC IDENTIFICATION NUMBER ▼ C C00488742		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on					
Full Name of Payee National Association of REALTORS			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2014		
Mailing Address 430 N Michigan Ave			Amount 50.00		
City Chicago	State IL	Zip Code 60611-4011	Transaction ID : E705AD63BE3CA42D89A0		
Purpose of Expenditure Consulting Services		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Sen. Mark E. Udall		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO		
Calendar Year-To-Date Per Election for Office Sought 1800.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Strategic Partners & Media, Inc			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2014		
Mailing Address PO Box 480			Amount 271180.00		
City Arnold	State MD	Zip Code 21012-0480	Transaction ID : E6DDE9F9ADB66459DA41		
Purpose of Expenditure TV Ad buy & Production costs		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Rep. Tom W. Reed II		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 23 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought 621349.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			271230.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Michael McGrew</i>		[Electronically Filed]		Date MM / DD / YYYY 10 / 10 / 2014	